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SERIAL NUMBER 10/722,891	FILING OR 371(c) DATE 11/26/2003 RULE	CLASS 607	GROUP ART UNIT 3766	ATTORNEY DOCKET NO. P-10520.02
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APPLICANTS

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**** CONTINUING DATA *******

This application is a CIP of 10/261,317 09/30/2002

**** FOREIGN APPLICATIONS *********IF REQUIRED, FOREIGN FILING LICENSE GRANTED**

** 03/10/2004

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY MN	SHEETS DRAWING 11	TOTAL CLAIMS 16	INDEPENDENT CLAIMS 2
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature _____ Initials _____				

ADDRESS

27581

TITLE

Multi-mode programmer for medical device communication

FILING FEE RECEIVED 900	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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